Colchester Public Schools
Application for Approval of Field Trip

Overview: This form must be completed by all staff to request approval of a field trip.

Directions:

1. Complete the form attaching all applicable documentation and submit to your administrator. The application must be submitted **at least two weeks prior for in-state** field trips, and **two weeks and two months prior for out-of-state** trips.
2. The Administrator will recommend or not recommend. If approved, the form must be sent to the Superintendent.
3. The Superintendent will either recommend or not recommend and will bring to the Board of Education if the request is for an out-of-state field trip.
4. If applicable, the Board of Education reviews and makes the final decision.

Today's Date:

Field Trip Information

Applicant Name: Lynn Goodwin	**Method of Transportation:** Coach bus
School: ~~Choose School~~ WJJMS	**Bus Service Number(s)** *(if applicable)*:
Grade(s) and Group(s): 8th Grade Band/Chorus	**Number of Students:** 50
Date(s) of Trip: April 9th 2025	**Number of Day(s) of Trip:** 1
Event: Broadway musical & lunch in NYC	
Destination: New York	**Phone Number:** 860-877-7806
Address (for each destination): 1634 Broadway (At. W 50th St.)	**State:** NY
Time of Departure From School: 7:00 AM **Time of Arrival Back at School:** 8:30 pm	**Special Clothing and/or Equipment Required:** N/A

Student Cost Information

***Cost to Student:** $ 185.00	**Suggested Student Pocket Money:** $ 20.00

Supervision Information (list names of all employees, other chaperones, and cell phone number for each)

1. **Name:** Lynn Goodwin	**Cell Phone:** 860-334-6211
2. **Name:** Keith Morrissette	**Cell Phone:** 860-303-7777

List all adult chaperones: Ratio of adult chaperones to students must be at least: 1:5 for Grades K-2, 1:8 for Grades 3-5; 1:10 for Grades 6-8; and 1:15 for Grades 9-12 (one-day trips) or 1:10 (overnight trips)

There will be 5 teacher/Admin. chaperones on this trip.

Administrator Signatures

Applicant Signature Lynn Goodwin

Administrator's Signature ☒ Recommended ☐ Not Recommended

Superintendent's Signature ☒ Recommended ☐ Not Recommended

Board of Education (if applicable)

Board of Education Meeting Date: ☐ Recommended ☐ Not Recommended

Bus Information

Bus Reservation Date:	**Price of Bus(es): $**

*If a trip to a foreign country, please complete and attached the CIRMA insurance application and notify parents of coverage

Field Trip Instructional Plan
Colchester Public Schools

Field Trip Location(s): Broadway NYC

Reference Check: Visited site on: 4/24 *or* Spoke with: Josh Doyon-SilverMill trave

Name: Lynn Goodwin **Grade/Group:** 8th Grade chorus/band
(Teacher(s) completing this form)

Instructional Focus of Trip

- **This field trip is directly related to curriculum** ☑ Yes ☐ No
- **Curriculum Unit(s):** 1, 2 and 7
- **Specific Curriculum Standards Addressed by Field Trip** (please refer to CT Core and disciplinary standards):
  Pr4.2.E.8a Pr6.1.E.11a Cn10.0.E.8a Cn11.0.E.8a
  Pr4.3.E.11a Pr6.1.E.11b Re7.1.E.8a
  Pr5.1.E.11a Re8.1.E.5a Re7.2.E.8a
- **Assessment of Student Learning** (describe or attach the work students will complete upon their return to convey the learning):
  We are rehearsing one of the pieces from the show the Lion King. We will be comparing the 2 versions of the pieces and writing about the experience of watching a live performance.

Trip Agenda/Activities: List/attach entire break out of times for each day. Include travel time and all activities. Attach additional sheet if needed.

DATE/TIME	LOCATION	ACTIVITY
4/9/25 7:00am	WJJMS	driving to NYC
11:00	Hard Rock Cafe	have lunch
2:00	watch The Lion King	
5:00	Coach bus	drive back
7:00	Darien Rest Stop	stop for dinner
8:30	WJJMS	arrive back to school

Approvals:

Department Chair (High School Only)	Date	☐ Approved ☐ Denied
Principal	9/20/24	☑ Approved ☐ Denied
Assistant Superintendent	10/2/24	☑ Approved ☐ Denied

Field Trip Cost Form

Date(s) of Trip:

Event:

M&J Bus(es) ONLY

Number of Students:

N/A

Estimated Hours for trip:
(Add 1 hour pre/post trip)

Number of Buses:

Per Student Calculations:

	M&J Bus(es) ONLY	Coach Bus(es) ONLY
Admission per student:		
Miscellaneous Fees per student:		
Total admission and miscellaneous fees:		
Cost of Bus	_____	_____
Total Field Trip ***Cost per Student:**	_____	_____

Additional Costs:

Number of Substitute Teachers _____

Rate per Day

Special Education costs _____

Cost Associated if Nursing Required _____

Total ***Cost to District:** _____

Total ***Cost of Trip:** _____

Alternate funding for trip provided by:

***Insert these costs on the accompanying Field Trip Application**

Form updated 5.27.21